Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: lo	dentify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your f	full name			
	your go picture examp license Bring y identifi	the name that is on overnment-issued e identification (for ole, your driver's e or passport). your picture ication to your	Wanda First name D. Middle name McBride-Martin Last name and Suffix (Sr., Jr., II, III)	-	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	meetin	ng with the trustee.	East name and earnx (et., et., ii, iii)		East Hame and Camx (Cr., Or., II, III)
2.	used i	ner names you have in the last 8 years e your married or n names.	Wanda D. McBride Wanda D. Martin		
3.	your S numbe Individ	he last 4 digits of Social Security er or federal dual Taxpayer fication number	xxx-xx-5064		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 2 of 53

Debtor 1 Wanda D. McBride-Martin

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	730 E. 105th St.	If Debtor 2 lives at a different address:		
		Chicago, IL 60628 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 3 of 53

Debtor 1 Wanda D. McBride-Martin

Case number (if known)

7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> page 1 and check the approp	by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto riate box.	;y	
	choosing to file under	Chapter 7						
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		☐ Ch	napter 13					
3.	How you will pay the fee		about how yo	u may pay. Typi attorney is subn	ically, if you are paying the fee	neck with the clerk's office in your local court for more de e yourself, you may pay with cash, cashier's check, or mo behalf, your attorney may pay with a credit card or check	oney	
						ption, sign and attach the Application for Individuals to P	ay	
			I request that but is not requapplies to you	t my fee be wai uired to, waive y ur family size and	our fee, and may do so only in dividing the feet of th	otion only if you are filing for Chapter 7. By law, a judge m f your income is less than 150% of the official poverty line se in installments). If you choose this option, you must fill	e that	
			the <i>Applicatio</i>	n to Have the C	Chapter 7 Filing Fee Waived (C	Official Form 103B) and file it with your petition.		
Э.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
			Debtor			Relationship to you		
			District	-	When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No	. Go to li	ne 12.				
	residence:	☐ Ye	s. Has yo	ur landlord obta	ined an eviction judgment aga	ainst you and do you want to stay in your residence?		
				No. Go to line 1	12.			
				Yes. Fill out <i>Init</i> bankruptcy peti		on Judgment Against You (Form 101A) and file it with this	S	

Debtor 1	Wanda D. McBride-Martin	Document	Page 4 of 53	ase number (if known)	
					

Par	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name				
	If you have more than one sole proprietorship, use a separate sheet and attach		te & ZIP Code				
	it to this petition.		Check	the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				☐ None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is t	he hazard?			
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?			iate attention is why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?			
	- ,				Number, Street, City, State & Zip Code		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 5 of 53

Debtor 1 Wanda D. McBride-Martin

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 Wanda D. McBride-Martin Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Wanda D. McBride-Martin Signature of Debtor 2 Wanda D. McBride-Martin Signature of Debtor 1

Voluntary Petition for Individuals Filing for Bankruptcy

September 24, 2016 MM / DD / YYYY

Executed on

MM / DD / YYYY

page 6

Executed on

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 7 of 53

Debtor 1 Wanda D. McBride-Martin

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kerrie	S. Neal	Date	September 24, 2016
Signature of	f Attorney for Debtor		MM / DD / YYYY
Kerrie S. I	Neal		
Printed name			
Zalutsky 8	& Pinski, Ltd.		
Firm name	·		
111 W. Wa	ashington		
Suite 1550)		
Chicago, I	IL 60602		
	City, State & ZIP Code		
Contact phone	312-782-9792	Email address	admin@ZAPLawFirm.com
6270224			
Bar number & S	State		

		DOCUIII	THE TAUC O OF JO				
Fill in this infor	mation to identify your	case:					
Debtor 1	Wanda D. McBride-Martin						
	First Name	Middle Name	Last Name				
Debtor 2							
Spouse if, filing)	First Name	Middle Name	Last Name				
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number _							

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,469.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,469.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,845.00
	Your total liabilities	\$	26,845.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,452.55
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,431.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Entered 09/24/16 11:56:30 Case 16-30436 Doc 1 Filed 09/24/16 Desc Main Document

Page 9 of 53
Case number (if known) Debtor 1 Wanda D. McBride-Martin

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form		0.070.00
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$	3,978.80

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 10 of 53 Fill in this information to identify your case and this filing: Debtor 1 Wanda D. McBride-Martin Last Name First Name Middle Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Yes. Describe.....

4 Standard Rooms of Furniture; Miscellaneous Household Goods & Furnishings

\$1,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Debtor 1	Wanda D. McBride	Document -Martin	Page 11 of 53 Case number (if know.	n)
■ Yes.	. Describe			
	Stand	dard electronics including lap to	p and smart phone	\$400.00
Examp		s; paintings, prints, or other artwork; bo morabilia, collectibles	ooks, pictures, or other art objects; stamp, co	in, or baseball card collections;
	Misc	ellaneous Books & Photos		\$200.00
Examp No	nent for sports and hobi oles: Sports, photographic musical instruments . Describe		bicycles, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
■ No		uns, ammunition, and related equipmer	nt	
□ No		urs, leather coats, designer wear, shoes	s, accessories	
	Used	Clothing		\$700.00
□ No		ostume jewelry, engagement rings, wed	dding rings, heirloom jewelry, watches, gems	, gold, silver
	Misc	ellaneous Jewelry		\$150.00
Exam ■ No □ Yes. 14. Any o ■ No	arm animals aples: Dogs, cats, birds, he Describe ther personal and house Give specific information	ehold items you did not already list,	including any health aids you did not list	
		your entries from Part 3, including a here	any entries for pages you have attached	\$2,450.00
	escribe Your Financial Asse			
Do you o	wn or have any legal or	equitable interest in any of the follov	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		your wallet, in your home, in a safe dep	oosit box, and on hand when you file your pe	tition
Official For		Schedule A/B:		page 2

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Page 12 of 53

Case number (if known) Document

Debtor 1 Wanda D. McBride-Martin

				Cash	\$4.00		
17.				; certificates of deposit; shares in credit unions, brokerage houses, and the same institution, list each.	d other similar		
	□ No ■ Yes	•	·	Institution name:			
	- Yes						
		17.1.	Savings	Maroon Financial	\$5.00		
		17.2.	Checking & Savings Accounts	Navy Federal Credit Union	\$10.00		
18.	Bonds, mutual funds, o Examples: Bond funds, i ■ No			ge firms, money market accounts			
	☐ Yes		Institution or issuer name	э:			
19.	Non-publicly traded sto joint venture ■ No	ck and	interests in incorporate	d and unincorporated businesses, including an interest in an LL0	C, partnership, and		
	☐ Yes. Give specific info		about them me of entity:	% of ownership:			
20.	Negotiable instruments i Non-negotiable instrume	nclude	personal checks, cashiers	e and non-negotiable instruments of checks, promissory notes, and money orders. It is someone by signing or delivering them.			
	■ No □ Yes. Give specific infor		about them uer name:				
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No						
	Yes. List each account		•				
		Type	of account:	Institution name:			
				Retirement	Unknown		
22.	Examples: Agreements	l deposi	ts you have made so that	you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies, or other	ers		
	■ No □ Yes			Institution name or individual:			
23.	Annuities (A contract for ■ No	a perio	dic payment of money to	you, either for life or for a number of years)			
		uer nam	ne and description.				
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5. ■ No	n IRA, i 29A(b),	n an account in a qualifi and 529(b)(1).	ied ABLE program, or under a qualified state tuition program.			
		titution	name and description. Se	parately file the records of any interests.11 U.S.C. § 521(c):			
25.	Trusts, equitable or futo ■ No	ure inte	rests in property (other	than anything listed in line 1), and rights or powers exercisable for	or your benefit		
	☐ Yes. Give specific info	rmation	about them				

Official Form 106A/B Schedule A/B: Property page 3

		Case	16-30436	Do	c 1		Entered 09/24 Page 13 of 53	1/16 11:56:30	Desc Main
De	ebtor 1	Wanda	D. McBride-M	artin		Document		ase number (if known)	
	Exampl ■ No	les: Intern		s, webs	ites, p	ts, and other intellectua roceeds from royalties an		s	
	Exampl ■ No	les: Buildii	ises, and other and permits, excluding permits, excluding the control of the cont	sive lice	enses,	ngibles , cooperative association	holdings, liquor license	es, professional license	es
		·	owed to you?	bout tin	O111				Current value of the
	oney or p	noperty c	med to you.						portion you own? Do not deduct secured claims or exemptions.
		unds owe	d to you						
	□ No ■ Yes. 0	Give speci	fic information ab	oout the	em, inc	cluding whether you alrea	ady filed the returns and	d the tax years	
					2016	estimated		Federal	\$1,000.00
30.	 No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 								
				Insura ugh J					\$0.00
	If you a someon	re the ber ne has die	neficiary of a living			someone who has died at proceeds from a life ins		urrently entitled to rece	vive property because
	Exampl ■ No	les: Accide				you have filed a lawsuit surance claims, or rights		or payment	
	■ No		t and unliquidate	ed clai	ms of	every nature, including	g counterclaims of the	e debtor and rights to	set off claims
	Any fina ■ No	ancial ass	sets you did not	alread	y list				

	Case 16-30436 Doc 1 Filed 09/24		9/24/16 11:56:30	Desc Main
Debt	Documen or 1 _ Wanda D. McBride-Martin	t Page 14 of	Case number (if known)	
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includitor Part 4. Write that number here			\$1,019.00
Part 5	Describe Any Business-Related Property You Own or Have an Int	erest In. List any real est	ate in Part 1.	
37. D o	you own or have any legal or equitable interest in any business-rela	ated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	st In.	
46. D	o you own or have any legal or equitable interest in any farm	n- or commercial fishi	ng-related property?	
ı	No. Go to Part 7.			
[Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
	o you have other property of any kind you did not already lis Examples: Season tickets, country club membership	st?		
	No Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
	<u> </u>		L	
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$2,450.00		
	Part 4: Total financial assets, line 36	\$1,019.00		
	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$3,469.00	Copy personal property to	stal \$3,469.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$3,469.00

Official Form 106A/B Schedule A/B: Property page 5

Document Fill in this information to identify your case: Debtor 1 Wanda D. McBride-Martin Last Name Middle Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	wn		Specific laws that allow exemption	
	Copy the value from Schedule A/B				
4 Standard Rooms of Furniture; Miscellaneous Household Goods &	\$1,000.00	\$1,000.00		735 ILCS 5/12-1001(b)	
Furnishings Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Standard electronics including lap top and smart phone	\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Miscellaneous Books & Photos Line from Schedule A/B: 8.1	\$200.00		100%	735 ILCS 5/12-1001(a)	
Line Holli Goredale A.B. G.1			100% of fair market value, up to any applicable statutory limit		
Used Clothing Line from Schedule A/B: 11.1	\$700.00		100%	735 ILCS 5/12-1001(a)	
Line Holli Goredale A.B. 1111			100% of fair market value, up to any applicable statutory limit		
Miscellaneous Jewelry Line from Schedule A/B: 12.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
Line nom Scriedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 16 of 53
Case number (if known)

ре	Wallua D. Wichilde-Wallin			Case number (ii known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Cne	eck only one box for each exemption.		
	Cash Line from Schedule A/B: 16.1	\$4.00		\$4.00	735 ILCS 5/12-1001(b)	
				100% of fair market value, up to any applicable statutory limit		
	Savings: Maroon Financial Line from Schedule A/B: 17.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
	Zine nom constant 702. TTT			100% of fair market value, up to any applicable statutory limit		
	Checking & Savings Accounts: Navy Federal Credit Union	\$10.00		\$10.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	Retirement Line from Schedule A/B: 21.1	Unknown			735 ILCS 5/12-1006	
	Line from Scriedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit		
	Federal: 2016 estimated Line from Schedule A/B: 28.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
				100% of fair market value, up to any applicable statutory limit		
	Life Insurance through Job	\$0.00		100%	735 ILCS 5/12-1001(f)	
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)	
	■ No					
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No			, , , , , , , , , , , , , , , , , , , ,		
	☐ Yes					

Fill in this infor				
Debtor 1	Wanda D. McBrid			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Document	Page 18 of 53	
Fill in this	s information to identify your	case:		
Debtor 1	Wanda D. McBrid	de-Martin		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, fil	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS	
Cooo num	hor			
Case num (if known)				☐ Check if this is an
				amended filing
				 -
	Form 106E/F		_	_
Sched:	ule E/F: Creditors V	Vho Have Unsecured	Claims	12/15
Schedule G Schedule D left. Attach	Executory Contracts and Unex Creditors Who Have Claims Se	pired Leases (Official Form 106G). D cured by Property. If more space is r	o not include any creditors with partial needed, copy the Part you need, fill it o	3: Property (Official Form 106A/B) and on ly secured claims that are listed in ut, number the entries in the boxes on the le top of any additional pages, write your
Part 1:	List All of Your PRIORITY U	nsecured Claims		
•	creditors have priority unsecur	ed claims against you?		
■ No.	Go to Part 2.			
☐ Yes	S.			
Part 2:	List All of Your NONPRIORI	TY Unsecured Claims		
3. Do any	creditors have nonpriority unse	ecured claims against you?		
□ No.	You have nothing to report in this	part. Submit this form to the court with	your other schedules.	
■ Yes	3			
4. List all	l of your nonpriority unsecured o	ely for each claim. For each claim listed	e creditor who holds each claim. If a cre, identify what type of claim it is. Do not lis ave more than three nonpriority unsecure	t claims already included in Part 1. If more
Part 2.	To crounce riords a particular stann,	inci inci cinci ciccincio in i dili cin yea i	are more man and mempheric, and court	a siamic im cat and commutation i ago of
				Total claim
	merica's Fi	Last 4 digits of acco	ount number 0793	\$0.00
No	onpriority Creditor's Name		Opened 6/11/11 L	ast Activo
	415 W 22nd St.	When was the debt	-	Last Active
	ak Brook, IL 60523			
	umber Street City State ZIp Code ho incurred the debt? Check one	-	ile, the claim is: Check all that apply	
_	•			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated☐ Disputed		
	Debtor 1 and Debtor 2 only			
	$oldsymbol{1}$ At least one of the debtors and an		ITY unsecured claim:	
	Check if this claim is for a comebt	imunity	a cut of a conception	a that you did not
	the claim subject to offset?	report as priority clair	g out of a separation agreement or divorcense	e mai you did flot
	No	☐ Debts to pension	or profit-sharing plans, and other similar o	lebts
] Yes	Other, Specify	Unsecured	

Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Case 16-30436 Doc 1

Page 19 of 53 Case number (if know) Document Debtor 1 Wanda D. McBride-Martin

4.2	AmeriCredit/GM Financial	Last 4 digits of account number	0881	\$9,254.00
	Nonpriority Creditor's Name Po Box 183853 Arlington, TX 76096	When was the debt incurred?	Opened 05/12 Last Active 9/07/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.3	Belden Jewelers/Sterling Jewelers, Inc	Last 4 digits of account number	9833	\$825.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1799 Akron, OH 44309	When was the debt incurred?	Opened 01/16 Last Active 9/16/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc		
4.4	Capital One	Last 4 digits of account number	7231	\$438.00
	Nonpriority Creditor's Name		Opened 03/16 Last Active	
	Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	6/10/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	■ Other. Specify Credit Card		
	□ 162	Other. Specify	<u> </u>	

Debtor 1 Wanda D. McBride-Martin

Document Page 20 of 53

Case number (if know)

4.5	Capital One Auto Finance	Last 4 digits of account number	1001	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 30258	When was the debt incurred?	Opened 02/09 Last Active 6/15/12	
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Automobile	•	
4.6	Comcast Nonpriority Creditor's Name	Last 4 digits of account number		\$1,578.00
	1255 W North Ave Chicago, IL 60622-1562	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Collection		
4.7	Comenitycapital/dvdsbr Nonpriority Creditor's Name	Last 4 digits of account number	5337	\$1,564.00
	Comenity Bank Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 02/16 Last Active 4/15/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Charge Acc	count	

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 21 of 53

Debtor 1 Wanda D. McBride-Martin Case number (if know) 4.8 **Enhanced Acquistions LLC** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **PO BOX 1556** When was the debt incurred? Manitowoc, WI 54221 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 4907 **Evergreen Finance** Last 4 digits of account number Unknown Nonpriority Creditor's Name Opened 5/18/02 Last Active 2601 W. 95th When was the debt incurred? 5/21/08 Evergreen Park, IL 60462 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 \$0.00 **Gm Financial** Last 4 digits of account number 0 Nonpriority Creditor's Name Po Box 181145 When was the debt incurred? Arlington, TX 76096 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Debtor 1 Wanda D. McBride-Martin

Document Page 22 of 53
Case number (if know)

1.1 1	Golden Valley Lending	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	635 E Hwy 20, E Upper Lake, CA 95485	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.1	Ivanhoe Dental		\$1,500.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,300.00
	61 W. 144th Street Riverdale, IL 60827	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.1	JP Morgan Chase	Last 4 digits of account number	\$621.00
3	Nonpriority Creditor's Name		Ψ-1.00
	P.O. Box 260180	When was the debt incurred?	
	Baton Rouge, LA 70826 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Offeek all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	

Entered 09/24/16 11:56:30 Case 16-30436 Doc 1 Filed 09/24/16 Desc Main

Document Page 23 of 53 Debtor 1 Wanda D. McBride-Martin Case number (if know) 4.1 **Kay Jewelers** \$800.00 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 3680 When was the debt incurred? Akron, OH 44398-9914 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 **Maroon Financial Credi** 6823 \$1,125.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 08/16 Last Active 5525 S Ellis Ave Ste C When was the debt incurred? 8/19/16 Chicago, IL 60637 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.1 **Navy Federal Cr Union** 9284 \$5,385.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 01/16 Last Active Po Box 3700 When was the debt incurred? 8/05/16 Merrifield, VA 22119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

Debtor 1 only

☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community

debt Is the claim subject to offset?

■ No ☐ Yes ☐ Disputed Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

Credit Card Other. Specify

Debtor 1 Wanda D. McBride-Martin

Document Page 24 of 53

Case number (if know)

Opportunity Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
Richard A Snow 123 W Madison St., Ste 310 Chicago, IL 60602	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Sir Finance	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 6140 N. Lincoln Chicago, IL 60659	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Personal Ioan	
Speedycash.Com C/OAd Astra Recovery	Last 4 digits of account number 9713	\$831.00
Nonpriority Creditor's Name 8918 W 21st St N	When was the debt incurred? Opened 04/15	
Suite 200 Mailbox 303 Wichita, KS 67205 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

Case 16-30/36 Filed 00/24/16 Entered 00/24/16 11:56:30 Desc Main

	Case 10-30430	DOCI	FIIEU 03/24/10	LINETED 03/24/10 11.30.30	Desc Mai
			Document	Page 25 of 53	
Debtor 1	Wanda D. McBride-Mart	in		Case number (if know)	

4.2	Sullivan Urgent Aid Centers	Last 4 digits of account number 9380	\$324.00
<u> </u>	Nonpriority Creditor's Name ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.2	TCF National Bank		\$0.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	800 Burr Ridge Parkway Bankruptcy Department	When was the debt incurred?	
	Hinsdale, IL 60521 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stann is. Onesk an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Overdraft	
4.2	Zingo Cash	Last 4 digits of account number	\$2,600.00
	Nonpriority Creditor's Name		
	200 Fairway Drive, Ste 198 Vernon Hills, IL 60061	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	□ res	Other. Specify Collection	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 26 of 53

Debtor 1 Wanda D. McBride-Martin

Case number (if know)

Name and Address

CBE Group
Payment Processing Center

Payment Processing Cente P.O. Box 3136 Milwaukee, WI 53201 On which entry in Part 1 or Part 2 did you list the original creditor?

Line <u>4.6</u> of (*Check one*): □ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 <u>. </u>
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 26,845.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,845.00

Fill in this infor				
Debtor 1	Wanda D. McBrid	le-Martin		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Acceptance Now
Acceptance Now Customer Service
501 Headquarters Dr
Plano, TX 75024

State what the contract or lease is for
Rent to own furniture

		Docume	eni Paue zo u	JI 33	
Fill in this i	nformation to identify your				
Debtor 1	Wanda D. McBrid	e-Martin			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
O					
Case number (if known)	er			☐ Check if this is an amended filing	
Official	Forms 40011				
	Form 106H Jle H: Your Cod	obtors		4045	
Scheat	lie n. Your Cou	eptors		12/15	
■ No □ Yes 2. Withi Arizona ■ No. G	n the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	ı lived in a community p ı Nevada, New Mexico, Pu	r operty state or territor uerto Rico, Texas, Washi	y? (Community property states and territories include	
in line 2 Form 10 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarar Form 106E/F), or Sched	ntor or cosigner. Make :	if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Office 16G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the deback all schedules that apply:	ial fill
3.1 _{Na}	ame			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	umber Street			_	
Ci	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			Schedule E/F, line	
				☐ Schedule G, line	
	umber Street			_	
Ci	ity	State	ZIP Code		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 29 of 53

Fill	in this information t	to identify your ca	oco.									
	otor 1	7-7	cBride-Martin									
	otor 2 ouse, if filing)						_					
Uni	ted States Bankrup	otcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
(If kr	se number	1061		-				☐ Ar ☐ A: 13		ed filing ent showin as of the f	ng postpetition ollowing date:	
So	chedule I:	Your Inco	ome					1711	VI / DD/ 1			12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and y ith you, do not i	our spou nclude in	se is forn	s livir natio	ng with y n about	you, incl your spo	ude inforr ouse. If m	mation about ore space is	your needed,
1.	Fill in your empl information.	oyment		Debtor 1					Debtor 2	or non-fi	iling spouse	
	If you have more attach a separate		Employment status	■ Employed					☐ Emple	-		
	information about employers.	rmation about additional bloyers.	Occupation	☐ Not employed Clinic Coordinator				☐ Not e	mpioyea			
	Include part-time, self-employed wo		Employer's name	University of Chicago Hospitals								
	Occupation may i or homemaker, if		Employer's address		5758 S. Maryland Chicago, IL 60637							
			How long employed t	here? 11 y	years				_			
Par	t 2: Give De	tails About Mon	thly Income									
	mate monthly incouse unless you are		ate you file this form. If	you have nothing	to report	for a	any lir	ne, write	\$0 in the	space. In	clude your no	n-filing
	u or your non-filing e space, attach a so		ore than one employer, co	ombine the inform	nation for	all ei	mploy	ers for t	hat perso	n on the li	ines below. If	you need
								For Deb	tor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl			2.	\$_	3,8	886.76	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.			3.	+\$_		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lin	ne 2 + line 3.			4.	\$_	3,88	6.76	\$	N/A	

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 30 of 53

Deb	otor 1	Wanda D. McBride-Martin	-	(Case	number (if know	n)				
					For	Debtor 1		For Donor-fi		2 or spouse	
	Cop	by line 4 here	4.		\$_	3,886.7	6	\$		N/A	<u> </u>
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	739.0	3	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$_	116.6	1	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_	0.0	0	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	50		\$_	0.0		\$		N/A	_
	5e.	Insurance	5e		\$_	311.0	_	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.0	_	\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify: FSA	5g	ያ. ገ.+	\$ \$	54.9 212.5		+ \$		N/A N/A	_
_		· • • — — — — — — — — — — — — — — — — —	_		· —		_	· :—			_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	1,434.2		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,452.5	5	\$		N/A	<u> </u>
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_	0.0	_	\$		N/A	_
	8b.		8b	Ο.	\$_	0.0	0	\$		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	80		\$_	0.0		\$		N/A	_
	8d.	, , , , , , , , , , , , , , , , , , , ,	80		\$_	0.0		\$		N/A	
	8e.	Social Security	86	€.	\$	0.0	0	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	:	\$	0.0	0	\$		N/A	
	8g.	Pension or retirement income	_ 8g		<u> </u> *	0.0		\$		N/A	_
	8h.	Other monthly income. Specify:			\$	0.0		+ \$		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0.0	0	\$		N/	A
10	Cal	culate monthly income. Add line 7 u line 0	40	Φ.		0.450.55	φ		NI/A	•	0 4E0 EE
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,452.55 +	\$_		N/A	= \$ _	2,452.55
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe		,	•		,		∍ J. +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	2,452.55
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income
		Voc Evolein									

Official Form 106I Schedule I: Your Income page 2

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 31 of 53

Filli	n this informa	tion to identify yo	our case.					
Debt		Wanda D. M		artin			k if this is:	
Debt (Spo	tor 2 buse, if filing)							ving postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS	ī	MM / DD / YYYY	
	e number nown)							
		rm 106J	<u></u>			•		
Be a	as complete a		s possible eded, atta	. If two married people ar				
Part	1: Descr	ibe Your House	ehold					
1.	■ No. Go to □ Yes. Doe	o line 2. s Debtor 2 live		ate household? al Form 106J-2, <i>Expens</i> es	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes □ No □ Yes □ No
								☐ Yes ☐ No ☐ Yes
3.	expenses of	oenses include f people other t d your depende	han _	No Yes				1 103
Esti exp	mate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	e 4. \$		550.00
	If not includ	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner': maintenance, re		's insurance ıpkeep expenses		4b. \$ 4c. \$		0.00 25.00
		owner's associa				4d. \$		0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 32 of 53

225.00 0.00 250.00 0.00
0.00 250.00
0.00 250.00
250.00
400.00
0.00
150.00
75.00
300.00
300.00
125.00
50.00
25.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
156.00
0.00
0.00
0.00
me.
0.00
0.00
0.00
0.00
0.00
100.00
2,431.00
2,431.00
2 424 00
2,431.00
2,452.55
2,431.00
21.55
o increase or decrease because
to

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 33 of 53

Fill in th	is information to identify you	case:			
Debtor '					
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case nu	mher				
(if known)		_			Check if this is an amended filing
	l Form 106Dec				
Dec	aration About	an Individua	I Debtor's So	chedules	12/15
years, o	both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.			
Dio	l you pay or agree to pay som	eone who is NOT an atto	orney to help you fill out I	pankruptcy forms?	
•	No				
	Yes. Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ler penalty of perjury, I declare they are true and correct.	e that I have read the sui	mmary and schedules file	ed with this declaration	and
X	/s/ Wanda D. McBride-Mar	tin	X		
	Wanda D. McBride-Martin Signature of Debtor 1		Signature of	Debtor 2	
	Date September 24, 2016		Date		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 34 of 53

Fill	in this inforn	mation to identify you	ır case:					
Deb	tor 1	Wanda D. McBr	ide-Martin Middle Name		Last Name			
Deb	tor 2	i iist ivaine	ivildule Ivalile		Last Name			
(Spo	use if, filing)	First Name	Middle Name		Last Name			
Unit	ed States Ba	inkruptcy Court for the	NORTHERN DISTRIC	T OF ILLI	NOIS			
Cas	e number _							and if this is an
(11 141							_	eck if this is an ended filing
Of•	ficial Fo	rm 107						
	ficial Fo atement		Affairs for Indiv	vidual	s Filing for B	ankruptcy		4/1
Be a	s complete a	and accurate as poss	ible. If two married peop , attach a separate sheet	le are filir	ng together, both are	equally responsible for		
Par	<u> </u>	,	arital Status and Where \	You Lived	l Before			
	-	r current marital stat	us?					
	☐ Married	•						
	■ Not mai							
2.	During the la	ast 3 years, have you	lived anywhere other th	an where	you live now?			
	_		•					
	✓ No✓ Yes. Lis	st all of the places you	lived in the last 3 years. Do	o not inclu	ide where you live nov	v.		
	Debtor 1 Pr	rior Address:	Dates Debto	r 1	Debtor 2 Prior Ac	Idress:		Dates Debtor 2
	Current		lived there From-To:		☐ Same as Debtor	1		lived there ☐ Same as Debtor 1
			2/16- prese	ent	— came as poster	•		From-To:
	2318 Varo Flossmoo		From-To: 3 years pri o	or	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
			ver live with a spouse or alifornia, Idaho, Louisiana,					
	■ No							
		ake sure you fill out So	hedule H: Your Codebtors	(Official F	Form 106H).			
Dow	5.2 Evoloi	in the Courses of Va	u la como					
Par	Explai	in the Sources of Yo	ar income					
4.	Fill in the total	al amount of income ye	mployment or from opera ou received from all jobs an u have income that you rec	nd all busi	nesses, including part	-time activities.	s calend	lar years?
	□ No							
	_	I in the details.						
			Debtor 1			Debtor 2		
			Sources of income		oss income	Sources of income		Gross income
			Check all that apply.	,	fore deductions and lusions)	Check all that apply.		(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Wanda D. McBride-Martin

Document Page 35 of 53

Case number (if known)

				Debtor 1			Debtor 2			
From January 1 of current year until the date you filed for bankruptcy:				Sources of income Check all that apply.	all that apply. (before deductions and exclusions) ges, commissions, \$34,472.15		Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips			
				■ Wages, commissions, bonuses, tips						
				☐ Operating a business			☐ Operating a	business		
For last calendar year: (January 1 to December 31, 2015)				■ Wages, commissions, bonuses, tips	\$38,992.00		☐ Wages, commissions, bonuses, tips			
				☐ Operating a business			☐ Operating a	business		
For the calendar year before that: (January 1 to December 31, 2014)				■ Wages, commissions, bonuses, tips	mmissions, \$42,942.00			☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business		
= 1	No	ource and the fill in the de	-	me from each source separat	tely. Do no	ot include income t	hat you listed in lir	ne 4.		
				Dahtar 1			Dobtor 2			
				Debtor 1 Sources of income Describe below.	each s	deductions and	Debtor 2 Sources of ind Describe below		Gross income (before deductions and exclusions)	
Part 3:	List	Certain Pa	yments You	Made Before You Filed for E	Bankrupto	cy				
_		Neither De individual puring the No.	ebtor 1 nor D brimarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or householder you filed for bankruptcy, did ach creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	umer debt Id purpose d you pay d a total of this for dom his bankru	any creditor a tota f \$6,425* or more lestic support obliquety case.	al of \$6,425* or mo in one or more pay gations, such as ch	ore? yments and the	he total amount you and alimony. Also, do	
•	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
		■ No.	Go to line 7							
		☐ Yes	include pay	ach creditor to whom you paid ments for domestic support of this bankruptcy case.						
Creditor's Name and Address			Dates of paymen	ent	Total amount	Amount you still owe	Was this p	payment for		

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 36 of 53

Debtor 1 Wanda D. McBride-Martin Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name paid still owe Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ☐ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened AmeriCredit/GM Financial 2012 Chevy Cruz 7/16 \$10,000.00 Po Box 183853 Arlington, TX 76096 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

court-appointed receiver, a custodian, or another official?

No

☐ Yes

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main

Page 37 of 53
Case number (if known) Document Debtor 1 Wanda D. McBride-Martin

Pa	rt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	ptcy,	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor		did you give any gifts or contributions with a totation	Il value of more than	\$600 to any charity?
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	or gambling?	tcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	Yes. Fill in the details.	3000	ille any incurence covered for the loca	Date of your	Value of preparty
	how the loss occurred	nclud	e the amount that insurance has paid. List pending noce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers				
	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pro	epari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services require		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Zalutsky & Pinski, Ltd. 111 W. Washington Suite 1550 Chicago, IL 60602 admin@ZAPLawFirm.com		Attorney Fees	various	\$217.05
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that your No	tors o		or transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Entered 09/24/16 11:56:30 Desc Main Case 16-30436 Doc 1 Filed 09/24/16 Page 38 of 53
Case number (if known) Document

Debtor 1 Wanda D. McBride-Martin

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as	airs? the granting of a s		
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a s	elf-settled trust or similar device	of which you are a
	■ No □ Yes. Fill in the details.				
	Name of trust	Description and v	alue of the propo	erty transferred	Date Transfer was made
Par	List of Certain Financial Accounts, In:	struments, Safe Deposi	t Boxes, and Sto	rage Units	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, assolution No Yes. Fill in the details.	or other financial accou	nts; certificates o	of deposit; shares in banks, credit	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	r bankruptcy, any	safe deposit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear before you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any property	you borrowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	110: Give Details About Environmental Info	ormation			
For	the nurness of Port 10, the following definiti	one emply:			

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Desc Main Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Page 39 of 53
Case number (if known) Document

Debtor 1 Wanda D. McBride-Martin

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No		hazardous material, pollutant, contaminant, or similar term.				,	
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) ZIP Code) Revisor Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Revisor Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Revisor Re	Rep	ort all notices, releases, and	proceedings that y	ou know about, regardless of whe	n they	occurred.	
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and	24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
Name of site Address (Number, Street, City, State and 2IP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and 2IP Code) Governmental unit Address (Number, Street, City, State and 2IP Code) Pos. Fill in the details. Case Title Case Number Case Number Case Title Case Number Address (Number, Street, City, State and 2IP Code) Address (Number, Street, City, State and 2IP Code) Name Address (Number, Street, City, State and 2IP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filled for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Before and after school EIN:		■ No					
Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title No Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Manda McBride-Martin Same as residence Transportation Ein:		_					
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Nature of the case Status			ate and ZIP Code)	Address (Number, Street, City, State a	_		Date of notice
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Employer Identification number Do not include Social Security number or ITIN. Dates business existed Dates business exi	25. Have you notified any governmental unit of any release of hazardous material?						
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Employer Identification number Do not include Social Security number or ITIN. Dates business existed Dates business exi		■ No					
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and SIP Code) Nature of the case Status of t		_					
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Manda McBride-Martin Same as residence Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN:			ate and ZIP Code)	Address (Number, Street, City, State a			Date of notice
No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Status of the case Status of				•		0	
Case Title Case Number Case Number Court or agency Name Address (Number, Street, City, State and 2IP Code) Part 11: Give Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence Transportation Nature of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Address Final Part 11: Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN:	26.	Have you been a party in an	y judicial or admini	istrative proceeding under any env	vironme	ental law? Include settlements a	nd orders.
Case Title Case Number Case Court or agency Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Court or agency Name Address (Number, Street, City, State and ZIP Code) Court or agency Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Nature of the case Status of t		_					
Case Number Name Address (Number, Street, City, State and ZIP Code)				Occupi on a manage	Netro		Otatas af the
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed Manda McBride-Martin Before and after school EIN:				Name Address (Number, Street, City,	Natu	re of the case	
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Do not include Social Security number or ITIN. Manda McBride-Martin Same as residence Before and after school Transportation EIN:	Par	t 11: Give Details About Yo	ur Business or Co	nnections to Any Business			
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence Describe the nature of the business Name of accountant or bookkeeper Dates business existed EIN: Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN:	27.	Within 4 years before you fil	led for bankruptcy,	did you own a business or have a	ny of tl	he following connections to any	business?
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence An owner of a corporation □ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN:		☐ A sole proprietor or	self-employed in a	trade, profession, or other activity	, eithei	r full-time or part-time	
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence Describe the nature of the business Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN:		☐ A member of a limite	ed liability company	y (LLC) or limited liability partners	hip (LL	P)	
□ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence An owner of at least 5% of the voting or equity securities of a corporation Employer Identification number Do not include Social Security number or ITIN. Employer Identification number Do not include Social Security number or ITIN. ElN:		☐ A partner in a partne	ership				
 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name		☐ An officer, director,	or managing execu	itive of a corporation			
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence Describe the nature of the business Describe the nature of the business Do not include Social Security number or ITIN. Dates business existed EIN: Transportation		☐ An owner of at least	5% of the voting o	r equity securities of a corporation	า		
Business Name Address (Number, Street, City, State and ZIP Code) Manda McBride-Martin Same as residence Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Dates business existed EIN: Transportation		☐ No. None of the above a	applies. Go to Part	112.			
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed EIN: Same as residence Transportation		Yes. Check all that app	ly above and fill in	the details below for each busines	ss.		
Manda McBride-Martin Before and after school Same as residence Dates business existed EIN: Transportation		Address				1	number or ITIN.
Same as residence Transportation		(Number, Street, City, State and ZIP	Code) Na	Name of accountant or bookkeeper		Dates business existed	
						EIN:	
		Same as residence	Tı	Fransportation		From-To 2013-2015	

Case 16-30436 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Doc 1 Page 40 of 53 Case number (if known) Document

Debtor 1 Wanda D. McBride-Martin

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document

Page 41 of 53
Case number (if known) Debtor 1 Wanda D. McBride-Martin

Part 1	2: Sign Below			
are tru with a	e and correct. I unders	stand that making a false st result in fines up to \$250,00	Affairs and any attachments, and I declare under per atement, concealing property, or obtaining money o 0, or imprisonment for up to 20 years, or both.	, , , ,
	anda D. McBride-Ma			
	da D. McBride-Marti ture of Debtor 1	1	Signature of Debtor 2	
Date	September 24, 201	6	Date	
Did yo	u attach additional pag	ges to Your Statement of Fi	nancial Affairs for Individuals Filing for Bankruptcy	(Official Form 107)?
■ No				
☐ Yes				
Did yo	u pay or agree to pay	someone who is not an atto	rney to help you fill out bankruptcy forms?	
■ No				
П Уас	Name of Person	Attach the Bankruntov Per	tition Prenarer's Notice Declaration and Signature (Offi	cial Form 110)

connection

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 42 of 53

			•	•
Fill in this infor	mation to identify your	case:		
Debtor 1	Wanda D. McBrid			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	FRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	riduals Filing Under Chapt	ter 7
f you are an ind	dividual filing under cha	oter 7, you must fil	l out this form if:	
creditors hav	ve claims secured by yo	ur property, or		
ou must file th	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to t	set for the meeting of creditors, the creditors and lessors you list
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib your name and case nur		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims		
For any credition b	-	art 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
	reditor and the property t	nat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	2.10
December 1	,		☐ Retain the property and enter into a	☐ Yes
Description of	T		Reaffirmation Agreement.	
property securing debt	t:		☐ Retain the property and [explain]:	
9				
Creditor's			☐ Surrender the property.	□ No

Official Form 108

Creditor's

name:

property

Creditor's

name:

property

Description of

securing debt:

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

☐ No

☐ Yes

☐ No

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 43 of 53

Debtor 1	Wanda D.	McBride-Martin	Case number (if	known)
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	☐ Yes
	ption of		Reaffirmation Agreement.	
proper securir	ng debt:		Retain the property and [explain]:	
Part 2:	List Your Ur	nexpired Personal Property Lease	s	
n the info	ormation belo	ow. Do not list real estate leases. I	ed in Schedule G: Executory Contracts and Une Jnexpired leases are leases that are still in effe if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe	e your unexpi	red personal property leases		Will the lease be assumed?
Lessor's	name:	Acceptance Now		□ No
				■ Yes
Description Property:	on of leased :	Rent to own furniture		
Part 3:	Sign Below			
		ry, I declare that I have indicated tt to an unexpired lease.	my intention about any property of my estate th	nat secures a debt and any personal
X /s/	Wanda D. M	cBride-Martin	X	
	nda D. McB nature of Debt		Signature of Debtor 2	
Date	e Septer	mber 24, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 48 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re	Wanda D. McBride-Martin		Case No.		
			Debtor(s)	Chapter	7	
		DISCLOSURE OF COMPENSAT	TION OF ATTORN	EY FOR DE	BTOR(S)	
1.	cor	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in	e petition in bankruptcy, or	agreed to be paid	to me, for services ren	dered or to
		For legal services, I have agreed to accept		\$	217.05	
		Prior to the filing of this statement I have received		\$	217.05	
		Balance Due		\$	0.00	
2.	\$_	335.00 of the filing fee has been paid.				
3.	The	e source of the compensation paid to me was:				
		■ Debtor □ Other (specify):				
4.	The	e source of compensation to be paid to me is:				
		■ Debtor □ Other (specify):				
5.		I have not agreed to share the above-disclosed compensation	on with any other person unl	ess they are meml	pers and associates of	my law firm.
		I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of				w firm. A
6.	In	return for the above-disclosed fee, I have agreed to render le	egal service for all aspects o	f the bankruptcy c	ase, including:	
	b. c.	Analysis of the debtor's financial situation, and rendering actor Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on households.	of affairs and plan which me confirmation hearing, and a to market value; exem needed; preparation ar	ny be required; ny adjourned hear ption planning;	rings thereof;	ling of
		Outside counsel may be employed under firm	supervision, and paid	oy our firm.		
7.	Ву	agreement with the debtor(s), the above-disclosed fee does not representation of the debtors in any discharge			proceeding.	
		CEI	RTIFICATION			
this		ertify that the foregoing is a complete statement of any agree kruptcy proceeding.	ement or arrangement for pa	yment to me for re	epresentation of the de	btor(s) in
	Sep	tember 24, 2016	/s/ Kerrie S. Neal			
	Date	?	Kerrie S. Neal 62702	224		
			Signature of Attorney Zalutsky & Pinski, L	td.		
			111 W. Washington			
			Suite 1550 Chicago, IL 60602			
			312-782-9792 Fax:	312-782-0483		
1			admin@ZAPLawFir			

Name of law firm

PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

PRE-PETITION OTER TE	
service related to an including; providing situation and an explanation of available Zalutsky & Pinski, Ltd., agreed to prepare the Clerk of the Bankruptcy Court. In add Pinski, Ltd., agrees to obtain a credit report the procurement of mandatory credit cour is completed and any and all agreeme terminated upon the filing of Debtor(s)' Ban Debtor(s) agrees to pay a retained Pinski, Ltd., for the above stated pre-filic costs. It is understood that any monies pactosts is nonrefundable once received by not a petition is filed with the Bankruptcy (and the intention that upon the greement with the intention that upon the for under this agreement, Debtor(s) will Zalutsky & Pinski, Ltd., for post-filing baneither Debtor(s) nor Zalutsky & Pinski, Ltd., for post-filing baneither Debtor(s) nor Zalutsky & Pinski, Ltd., for post-filing baneither Debtor(s) nor Zalutsky & Pinski, Ltd. Bankruptcy petition has been filed with the himself or is free to obtain other representative filing of the Chapter 7 petition. If Debt their legal representative subsequent to agreement must be entered into at that till it is further understood that any further understood that any further understanding that these funds are to services should Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that these funds are to services should Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement the procure that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd., agreement the procure that the services and Debtor(s) opt to retain Zalutsky & Pinski, Ltd.,	ng legal services, related expenses, and court aid for said services, related expenses, and court Zalutsky & Pinski, Ltd., regardless of whether or Court. ebtor(s) and Zalutsky & Pinski, Ltd., enter this ne completion/termination of services contracted I enter into a second retainer agreement with nkruptcy related services. It is understood that td., are under any further obligation to each other his agreement have been terminated and/or the e Court. Debtor(s) retains the ability to represent ntation for services to be rendered subsequent to tor(s) intend(s) to have Zalutsky & Pinski, Ltd., as the petition being filed, an additional retainer
X Ward M-Bule	ZALUTSKY & PINSKI, LTD.
	510811
X Joint Debtor	Date
Cl. 1	

Date

Case 16-30436 Doc 1 Filed 09/24/16 Entered 09/24/16 11:56:30 Desc Main Document Page 50 of 53

United States Bankruptcy Court Northern District of Illinois

In re	Wanda D. McBride-Martin		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 24		
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	September 24, 2016	/s/ Wanda D. McBride-Martin Wanda D. McBride-Martin Signature of Debtor		

Acceptance Now Customer Service 501 Headquarters Dr Plano, TX 75024

America's Fi 1415 W 22nd St. Oak Brook, IL 60523

AmeriCredit/GM Financial Po Box 183853 Arlington, TX 76096

Belden Jewelers/Sterling Jewelers, Inc Attn: Bankruptcy Po Box 1799 Akron, OH 44309

Capital One Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Dept Po Box 30258 Salt Lake City, UT 84130

CBE Group
Payment Processing Center
P.O. Box 3136
Milwaukee, WI 53201

Comcast 1255 W North Ave Chicago, IL 60622-1562

Comenitycapital/dvdsbr Comenity Bank Po Box 182125 Columbus, OH 43218

Enhanced Acquistions LLC PO BOX 1556 Manitowoc, WI 54221

Evergreen Finance 2601 W. 95th Evergreen Park, IL 60462

Gm Financial Po Box 181145 Arlington, TX 76096

Golden Valley Lending 635 E Hwy 20, E Upper Lake, CA 95485

Ivanhoe Dental 61 W. 144th Street Riverdale, IL 60827

JP Morgan Chase P.O. Box 260180 Baton Rouge, LA 70826

Kay Jewelers
P.O. Box 3680
Akron, OH 44398-9914

Maroon Financial Credi 5525 S Ellis Ave Ste C Chicago, IL 60637

Navy Federal Cr Union Po Box 3700 Merrifield, VA 22119

Opportunity Financial Richard A Snow 123 W Madison St., Ste 310 Chicago, IL 60602

Sir Finance 6140 N. Lincoln Chicago, IL 60659

Speedycash.Com C/OAd Astra Recovery 8918 W 21st St N Suite 200 Mailbox 303 Wichita, KS 67205 Sullivan Urgent Aid Centers ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

TCF National Bank 800 Burr Ridge Parkway Bankruptcy Department Hinsdale, IL 60521

Zingo Cash 200 Fairway Drive, Ste 198 Vernon Hills, IL 60061